

# Immunization E-Letter

Issue #278

May 2, 2008

# Recent Measles Upsurge In United States—Indiana Remains Measles Free in 2008

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At least seven different geographical areas of the United States have experienced one or more cases of measles in April. Indiana has not reported a case of measles in 2008, but two bordering states and other states close to Indiana have. One of the more recent cases (rash onset of April 17) occurred in Chicago.

This report highlights the Chicago case and other areas of the country affected by measles. Given this recent upsurge in measles cases/outbreaks it remains important to consider measles in the diagnosis of febrile rash illness. Persons who: 1) have traveled to the areas listed in this article or out of the country, and 2) are unvaccinated or otherwise considered nonimmune, and 3) meet the case definition for measles\*, should be considered highly suspect for measles.

### Chicago Case

On April 25, 2008, an adult from a European country was confirmed with measles at a Chicago hospital. The case was exposed to a person infected with measles in his homeland on April 5 and traveled to the United States on April 10. The case developed rash on April 17 or 18 and was admitted to a Chicago hospital on April 20.

While infectious, the person stayed at a Chicago hotel, visited several restaurants and a grocery store, and worked in a high-rise building in the downtown Chicago area. Many tourists frequent this area in Chicago. The Chicago Department of Public Health (CDPH) is working with these venues to inform and advise potentially exposed employees. Because of the nature of these venues, it is not possible to contact patrons or other persons who may have come into contact with the patient.

### Immunization Program

2 N. Meridian St. Indianapolis, IN 46204

Phone: (800) 701-0704 E-mail: immunize@isdh.in.gov Persons suspected of having measles should be questioned about travel to Chicago during mid-April. Health care providers who identify possible related cases are asked to report the suspect case to the Indiana State Department of Health (Wayne Staggs 317.234.2804) or their local health department. The next generation of cases would be expected to occur from April 24 - May 5.

### Other States Experiencing Measles

Other states known to have ongoing measles situations include Arizona (Pima County), Wisconsin (Milwaukee County), Washington (King-Grant Counties), Michigan (Missaukee County), New York (New York City and Nassau County) and Pennsylvania (Pittsburgh).

### **General Information**

Measles is characterized by fever, cough, coryza and conjunctivitis followed by a generalized rash 2-4 days later. The rash begins on the face and then spreads to the rest of the body.

\* Measles case definition: A generalized rash lasting 3 days or longer, a temperature of 101° F or higher, and at least one of the three Cs (cough, coryza, conjunctivitis).

### Update from CDC: Hib Vaccine Shortage - April 23, 2008

- ◆ Please remember that revised Hib recommendations are NOT office-specific -- these affect the whole country.
- Do not give the Hib vaccine booster to healthy children aged 12— 15 months.

Stocking vaccine to give the booster dose during the shortage can take away from providers who are struggling to provide the primary series. Continue to give the recommended booster dose to high-risk children with asplenia, sickle cell disease, HIV, other immune syndromes, or those who are American Indian or Alaska Native.

- Don't miss an opportunity. Use what vaccine you have when appropriate. Do not turn away patients who are recommended to receive vaccine during shortage; more vaccine is coming,.
- ◆ Plan on when the shortage is over. Utilize best practice/recall-reminder systems and review the catch-up schedule which can be found at: www.cdc.gov/vaccines/recs/schedules
- Manufacturers are working closely with agencies within HHS to address Hib Supply issues. CDC will communicate updates on Hib vaccine supply as soon as they are are available.

# Excess Hepatitis B Vaccine Availability

The State Immunization Program still has an excess inventory of 1,200 doses of Pediatric Hepatitis B vaccine (ENGERIX B) in the fivedose, pre-filled syringes manufactured by GlaxoSmithKline that will expire in June and August 2008.

Please contact the State Immunization Program at 1-800-701-0704 if your clinic would like to utilize some of this short-dated vaccine.

# Vaccine Ordering Updates

It is time to place May orders. All providers who are Monthly, Bi-monthly, Quarterly and As-Is will order vaccine in May. Please fax your orders to 317-233-3719 through May 5th. The orders placed will be shipped to providers between the middle to end of May.

Please be alert to your ordering schedule when placing orders in May, June and July. All orders should include any vaccine your clinic or facility will need as you have the Back-to-School rush this summer.

# May is Hepatitis Awareness Month

May is recognized worldwide as Hepatitis Awareness Month. Specifically, World Hepatitis Day is May 19. This is a good time to provide awareness and education about viral Hepatitis, specifically hepatitis C, for which there is no vaccine. It is estimated that over 4 million Americans are infected with hepatitis C. Hepatitis C is the most common bloodborne pathogen in the United States and is the leading cause of liver transplants in the United States. Over 5,000 reported cases were reported in Indiana in 2007.

Many local government officials across the United States have proclaimed May as Hepatitis Awareness Month in their communities to raise awareness. Ideas to promote awareness about viral hepatitis include health fairs, public service announcements, and distribution of educational materials. The Indiana State Department of Health has a limited amount of brochures and educational materials available to provide to local communities.

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### Perinatal Hepatitis B Prevention Program (PHBPP)

The Perinatal Hepatitis B Prevention Program (PHBPP) provides case management to pregnant women reported to be infected with hepatitis B virus. According to the "Communicable Disease Reporting Rule for Physicians, Hospitals, and Laboratories, 410 IAC 1-2.3, Sec.73, made effective October 11, 2000, "all physicians and hospitals are to report Hepatitis, viral, Type B, pregnant women (acute and chronic), or perinatally exposed infants immediately (when discovered at or close to time of birth)." HBsAg-positive pregnant women should be reported to the Indiana State Department of Health using the Hepatitis B and Delta Hepatitis Case Investigation Form (SF52587), and HBsAg-positive infants should be reported using the Perinatal Hepatitis Case Investigation Form (SF 52589). Both forms can be found at: http://www.in.gov/isdh/form/communicable\_forms.htm

Investigation and case management duties regarding female hepatitis B cases of childbearing age (12-50 years old) are performed by the local health department and the Perinatal Hepatitis B Prevention Program. Laboratories are required to report positive HBsAg, HBeAg or anti-HBclgM to the local or state health department. All positive reports involving females of childbearing age are additionally submitted to the Perinatal Hepatitis B Prevention Program, who will determine their pregnancy status.

Issues regarding Perinatal Hepatitis B may be directed to Brenda Mason at (317)233-7658 and Rupert Arceo at (317)233-7003. Faxes should be sent to their attention at (317)233-3719.

### CHIRP Informational Sessions - New This Year!

CHIRP Informational Sessions are designed for <u>NON-CHIRP</u> users interested in learning more about the benefits of using CHIRP in their facility or practice. The agenda includes A) What is CHIRP; B) Benefits of using CHIRP; C) CHIRP's role in State Funded vaccine; D) How to enroll in CHIRP.

Call (888) 227-4439 or go to CHIRP.IN.GOV to register.

May 14, 2008 1:00 pm—2:30 pm

**Delaware County** 

Ball Memorial Hospital
Out Patient Medical Pavilion - Room 1
2401 West University Ave.

Current and
previously
published Vaccine
E-Letters are
available on the
CHIRP website @
CHIRPIN.GOV

# CHIRP User Group Meeting - For Current CHIRP Users

This session is designed for *CURRENT* CHIRP users who are interested in learning about upcoming changes or who have specific questions regarding CHIRP usage. The agenda includes A) System Status; B) Current Issues; C) Upcoming Changes; D) Monitoring Data Quality; and E) Questions/Answers

Call (888) 227-4439 or go to the CHIRP.IN.GOV to register.

May 14, 2008 9:30 am - 11:30 am

**Delaware County** 

Ball Memorial Hospital
Out Patient Medical Pavilion-Room 1
2401 West University Ave
Muncie, IN 47303

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